



# Union County Electrical Permit Application

Date: \_\_\_\_\_

## Site Information

Subdivision Name: \_\_\_\_\_ Lot #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Tax Parcel # **(REQUIRED)** \_\_\_\_\_

(circle one) **Commercial or Residential**

## Contractor Information

Contractor Fax# \_\_\_\_\_ Email **(REQUIRED)** \_\_\_\_\_  
Contractor (as licensed): \_\_\_\_\_ License #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone#: \_\_\_\_\_

## Owners Information

Name: \_\_\_\_\_ Associated Building Permit #(if applicable) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone#: \_\_\_\_\_

Intended Use For Wiring: \_\_\_\_\_

**Utilities:** ( ) New (power company notification requested) Power Company: \_\_\_\_\_

<u>Quantity</u>	<u>Description – Check ALL that apply</u>
_____	Service Equipment (Identical Replacement <b><u>ONLY</u></b> )
_____	This section is only applicable for “New” Services or increasing the size of an existing service.
_____	0 – 100 Amps
_____	101 – 200 Amps
_____	201 – 400 Amps
_____	401 – 600 Amps
_____	601 – 1000 Amps
_____	1001 – 2000 Amps
_____	2001 – Above Amps
_____	Other
<b>Project Value: including labor, materials and equipment \$ _____ (required)</b>	

Applicant Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Method of Payment: ( ) Account ( ) Cash or Check ( ) Credit Card

Incomplete Applications **WILL BE RETURNED**